

November 9, 2010

VIA ECFS

Ms. Marlene H. Dortch
Secretary
Federal Communications Commission
445 12th Street, S.W., Room TW-A235
Washington, D.C. 20554

Re: Notice of Ex Parte Communication - *Rural Health Care Universal Service Support Mechanism*, WC Docket No. 02-60.

Dear Ms. Dortch:

This is to inform you that on November 8, 2010, John Kravitz, Associate Vice President, Information Systems, Mark Reisinger, Director of Government Relations, of Geisinger Health System ("Geisinger"), and I met with the following representatives of the Telecommunications Policy Access Division of the Wireline Competition Bureau: Ernesto Beckford, Erica Myers, Divya Shenoy, Cindy Spiers, Romanda Williams, and Chin Yoo. During this meeting, Geisinger discussed the many ways it deploys telemedicine via broadband applications in rural areas of northern and central Pennsylvania, including remote patient monitoring and management of patients with chronic conditions. Geisinger also currently operates the only Health Information Exchange database in the Commonwealth of Pennsylvania. Geisinger discussed its comments filed in the pending rulemaking in this matter, and shared the attached presentation.

In addition, Geisinger discussed possible alternative criteria that the Commission might consider to prioritize funding for both the health infrastructure program ("HIP") and the broadband services program ("BSP") if funding requests exceed the amount of available funds. For example, for the HIP, Geisinger discussed that prioritization based on HPSA scores alone might have the unintended consequence of benefiting fewer patients, since it would award funds based solely on the greatest shortage of primary health care professionals serving a particular rural area. This might not necessarily represent the best use of funding if funding requests exceed the amount of available funds, since a smaller patient base would benefit from the broadband infrastructure deployment. Nor would such a scenario likely represent the most cost-effective use of funds based on cost per patient served. Geisinger argued that the Commission should actively consider and prioritize those eligible health care provider applicants for HIP funding who can immediately offer and deploy innovative and multiple uses of broadband connectivity to meet the diverse health care needs of rural communities (i.e. applications such as telehealth, telestroke, monitoring chronic care patients with congestive heart failure, etc.).

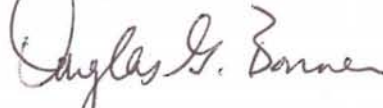
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Pursuant to Section 1.1206(b) of the Commission's rules, this letter is being filed electronically in the above-referenced proceeding.

Sincerely,

A handwritten signature in dark ink, appearing to read "Douglas G. Bonner". The signature is fluid and cursive, with the first name "Douglas" being more prominent.

Douglas G. Bonner

Enclosure

cc: Ernesto Beckford (w/encl.)
Erica Myers (w/encl.)
Divya Shenoy (w/encl.)
Cindy Spiers (w/encl.)
Romanda Williams (w/encl.)
Chin Yoo (w/encl.)